# Children's Mental Health Waiver

## Provider Procedure for: Service Retention and Termination

Implementation Date: 7/1/06

**Revision Date:** 9/1/07

#### Overview

The retention of a waiver opening is available for 120 days from the date of a youth's admission to another facility for out of home care. Facilities include hospitals, residential treatment centers, group homes, detention centers, or correctional facilities.

- If the out of home care stay is less than 120 days, the youth can be transitioned back home and a new Individual Service Plan will be written and implemented based on the significant changes that were made during the out of home care treatment.
- If the out of home care stay exceeds 120 days, the youth will be transitioned/discharged from the waiver. The youth may be eligible to re-apply for waiver services when he/she returns to the family community setting. Re-admission may be impacted by a waiver waiting list.

The following criteria will be used to identify when a youth is no longer eligible for Children's Mental Health Waiver service and termination/discharge should be pursued:

• Waiver appropriate level of care requirements are no longer met.

Inpatient hospital level of care is re-evaluated on a six-month basis.

Medicaid eligibility criteria is no longer met.

Medicaid eligibility must be maintained at all times during the waiver stay and is renewed annually.

• Maximum age is reached.

Youth reaches 21<sup>st</sup> birthday.

• Change in medical condition.

Emergence of a medical condition that would prevent participation in or the appropriateness of home and community based waiver services and supports.

Lack of safe living arrangements.

Circumstances and concerns about a youth's safety that results from a move to a setting identified by the Family Care Team as inappropriate for continued provision of waiver services and supports.

Cost of services.

Use of this condition would not occur except in highly unusual situations where statewide costs are affected.

• Choice to terminate.

Youth and family may choose to discontinue waiver services. Circumstances around this choice will be carefully reviewed with the youth and family by the Family Care Coordinator and Family Care Team.

• Service Plan goals are met.

Goals and service objectives defined in the Individual Service Plan have been met with agreement from the youth and family, Family Care Coordinator, and Family Care Team and satisfactory progress has been achieved. Youth and family are comfortable in their ability to identify needs, access services, and successfully engage available resources. Mental health services are at a stable outpatient level.

• Relocation of youth and family outside State of Wyoming (or outside initially identified waiver implementation sites until waiver services are available statewide).

Children's Mental Health Waiver services cannot be provided outside the state of Wyoming. If a youth and family move to a county/region where waiver services are not yet available, they will be discharged from the waiver. They may re-apply for services when they become available in their new community.

• Lack of cooperation in service plan development and implementation.

This will be pursued after all other options have been explored and attempted. Lack of cooperation is defined as behaviors which directly impede progress toward meeting goals and objectives agreed upon by the youth and family and Family Care Team and

documented in the service plan. The youth and/or family are not accomplishing actions within the scope of the waiver program which:

- Through the plan development process, the youth and/or family understand is their responsibility.
- The youth and/or family have agreed to do.
- Substantiated information by the provider(s) responsible for provision of waiver services of lack of cooperation by the youth and /or family.

Closure of services will not occur until all reasonable options available through assertive outreach, provider procedures for resolving participant complaints and grievances, and appropriate intermediaries as applicable and available to the Family Care Coordinator and Waiver Program have been exhausted.

### Refusal to sign or abide by Individual Service Plan.

Demonstrated when the youth and/or family does not sign or otherwise agree with the service plan developed with the assistance of the Family Care Coordinator (who ensures youth and family participation in decisions made about the plan) and the Family Care Team (whose membership includes individuals chosen by the youth and family). Plan development provides the youth and family with multiple opportunities to identify needs, choose providers, and participate in decisions about treatment goals and services. Examples of refusal:

- Not keeping appointments for services or with Family Care Team members.
- Engaging with waiver providers only in times of crisis.
- Not utilizing planned and available services identified in the plan.
- Not participating in service coordination or service planning meetings.
- Not carrying out assigned action steps for which the youth and/or family are responsible.
- Not providing information deemed critical for carrying out the plan to the Family Care Coordinator or other Family Care Team members.
- Not utilizing services identified as necessary for resolution of issues directly linked to the youth' serious emotional disturbance while utilizing other services reimbursed by Medicaid to meet other health needs.

#### Youth and/or family refuses critical service(s).

Critical services are identified in the plan and recognized by the youth and family and Family Care Team as essential to meeting goals identified in the plan. Examples of refusal are same as noted above.

#### Out of Home Care stays.

A youth receiving out of home care (hospitalization, placement in a group home or residential treatment center, detention center, or correctional facility) is not eligible to receive home and community based waiver services during the period of this out of home care. A waiver opening will be held for 120 days from date of admission to the out of home care facility.

### Wyoming State Hospital admission.

A youth/adolescent admitted to the Wyoming State Hospital is not eligible for services through the waiver while they are in the hospital.

Death of the youth.

# Waiver Provider Roles and Responsibilities

### Family Care Coordinator will:

- Inform Family Care Team Members when a youth is admitted for out of home care.
  - Monitor 120 timelines regarding retention of a waiver opening for a youth in out of home care.
- Follow the Provider Procedure for Transition to/from Out of Home Care for the identified length of the out of home care stay (> or < 120 days).
- Convene a Family Care Team meeting to discuss waiver discharge for any of the identified ineligibility criteria that require termination of waiver services (as outlined above).

- Contact the Waiver Program to review and discuss noncompliance concerns identified as outlined in the ineligibility criteria.
  - Work with the Waiver Program, Family Care Team, and natural family supports to develop a strategy to ensure all reasonable efforts are made and options exhausted before waiver discharge is concerned for noncompliance issues.
    - Strategies will be documented on the Family Care Team Meeting Minutes form (FCC-9).
    - Status will be reported using the Family Care Team Monthly Service Plan Review report (FCC-1).
- Follow the Provider Procedure for Waiver Discharge as applicable.
  - Use the Provider Procedure for Changes to the ISP Service Providers/Units to close the current Individual Service Plan.

#### Waiver Service Providers will:

- Carry out responsibilities as outlined in the Provider Procedure for Transition to/from Out of Home Care for the identified length of the out of home care stay (> or < 120 days).
- Attend Family Care Team meeting(s) called to discuss waiver discharge.
- Carry out responsibilities as outlined in the Provider Procedure for Waiver Discharge as applicable.